

A

Docket No. IQA-005.01

JC962 U.S. PRO
 09/182732
 02/13/01
 4 444444

Dear Sir:

Inventor(s): Shuqi Chen

Enclosed are:

- ☒ This is a request for filing a ☐ continuation-in-part ☐ divisional application under 37 CFR 1.53(b), of pending prior application serial no. _____ filed on _____ entitled _____.
- ☒ 33 pages of specification, 7 pages of claims, 1 page of abstract.
- ☒ 15 sheets of drawings.
- ☒ Unexecuted Declaration, Petition and Power of Attorney.
- ☐ An assignment of the invention to _____. A recordation form cover sheet (Form PTO 1595) is also enclosed.
- ☒ Applicant claims small entity status.
- ☐ Other _____.

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)
FOR:	NO. FILED	NO. EXTRA
BASIC FEE	////////////////////	
TOTAL CLAIMS	52 - 20	= 32
INDEP. CLAIMS	6 - 3	= 3
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

SMALL ENTITY	
RATE	FEE
////////	\$ 355
x 9=	\$ 288
x 40	\$ 120
+135	\$
TOTAL	763

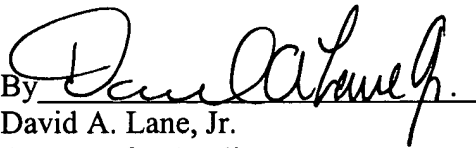
	OTHER THAN SMALL ENTITY	
<u>OR</u>	RATE	FEE
<u>OR</u>	/ / / / / / / /	\$ 710
<u>OR</u>	x 18=	\$
<u>OR</u>	x 80	\$
<u>OR</u>	+270	\$
<u>OR</u>	TOTAL	0

- ☐ Please charge my Deposit Account No. 06-1448 in the amount of \$
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$ 763.00 to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1448.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.
- ☐ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 06-1448.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.
- ☐ The issue fee set in 37 C.F.R. 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).
- ☐ Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.
- ☐ A check in the amount of \$ _____ to cover the recording of assignment documents is also enclosed.
- ☒ Address all future communications (May only be completed by applicant, or attorney or agent of record) to Beth E. Arnold at **Customer Number: 025181** whose address is:

Foley, Hoag & Eliot LLP
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Date: 2/13/01

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